PATENT APPLICATION FEE DETERMINATION RECORD  Effective December 8, 2004									'	Application or Docket Number			
CLAIMS AS FILED - PART I										10	12305	14	
(Column 1) (Column 2) SMALL E									ENIIIY	•	OTH OR <b>SMAI</b>	ER THAN L ENTIT	
U	.S. NATION	AL STAGE FEE	S					RATE	FE		RATE		
В.	ASIC FEE		SMAL	.L ENT. = \$ 150	LARGE ENT. = \$ 300		ю	BASIC FEE	15	চা ব	OR BASIC FEE	-	
E	MINATION	FEE		Satisfies PCT Article 33(1)- (4) = \$ 50 / \$ 100		All other situations = \$ 100 / \$ 200		EXAM. FEE	10		EXAM. FEE		
SE	ARCH FEE		ALL of	U.S. is ISA = \$ 50 / \$ 100 ALL other countries = \$ 200 / \$ 400		All other satuations = \$ 250 / \$ 500		SEARCH FE			SEARCH FE	E_	
FE	E FOR EXTR	A SPEC. PGS.		minus 100 =	/ 50 =		X \$ 125	<del>-   -   -   -   -   -   -   -   -   -  </del>		X \$ 250			
го	TAL CHARG	EABLE CLAIMS	3	minus 20 = ,				X \$ 25 =		70	R X\$50=		
NC	PEPENDENT	CLAIMS	11	minus 3 =	t		1	X \$ 100 =	:	0	R X \$ 200 :	<del>- </del> -	
ΛU	LTIPLE DEPI	ENDENT CLAIM P	RESENT	<del> </del>			7	+ \$ 180 =			ļ	<del></del>	
If the difference in column 1 is less than zero, enter "0" in column 2							_	TOTAL	<del>                                     </del>	OF	<u> </u>	<del>- </del>	
_		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Columnia (Colum		T R PRESENT SLY EXTRA		SMALL RATE	ADDI- TIONAL FEE	OF		ADDI- TIONAL FEE	
V I NICHOLINI V	Total	•	Minus	. **	=		1.	X \$ 25 =		OR	X \$ 50 =	1	
	Independent	*	Minus	***	=			X \$ 100 =		OR	X \$ 200 =		
	FIRST PRE	SENTATION OF A	MULTIPLE D	EPENDENT CU	AIM			+ \$ 180 =		OR	+ \$ 360 =	1	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT.	1	
T		(Column 1) CLAIMS REMAINING AFTER	<del></del>	(Column : HIGHEST NUMBER PREVIOUS	1.	Column 3) PRESENT EXTRA	ſ	RATE	ADDI- TIONAL		RATE	ADDI- TIONAL	
Ŀ		AMENDMENT		PAID FOR		- CANIVA	-	·····	- FEE			FEE	
ŀ	otal		Minus		=		-	X \$ 25 =		OR	X \$ 50 =		
ŀ	ndependent	لــــــا	Minus		= -		-	X \$ 100 =		OR	X \$ 200 =	<u>.</u>	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT				м	Ш	Ļ	+ \$ 180 =		OR	+ \$ 360 =		
								FEE		OR	FEE		
E t	he "Highest Nu	mn 1 is less than the mber Previously Paid mber Previously Paid	For" IN THIS 8	SPACE is less than	'20', ente	x '20'. '3'.							

FORM PTO-875 (Rev. 02/2005)

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